

07/23/01  
JC960 U.S. PTO

07-24-01

A

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. Polyprobe 3.0-017 cip cont cont

First Inventor Thor Nilsen

Title OPTIMALLY LABELED, etc.

Express Mail Label No.

EL804524760US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original, and a duplicate for fee processing)*
  2.  Applicant claims small entity status.  
*See 37 CFR 1.27.*
  3.  Specification [Total Pages 31]
- (preferred arrangement set forth below)
- Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (*if filed*)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 5]
  5. Oath or Declaration [Total Pages 2]
- a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with Box 18 completed)*
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6.  Application Data Sheet. See 37 CFR 1.76

ADDRESS: U.S. Commission for Patents  
Washington DC 20231

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8.  Nucleotide and/or Amino Acid Sequence Submission  
*(if applicable, all necessary)*
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  paper
  - c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement  
*(when there is an assignee)*  Power of Attorney
11.  English Translation Document *(if applicable)*
12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*
15.  Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*
16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).  
Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other: \_\_\_\_\_

18. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation  Divisional  Continuation-in-part (CIP) of prior application No.: 09/482,803

Prior application information: Examiner J. Riley Group / Art Unit: 1656

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label



or  Correspondence address below

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Country \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Name (Print/Type) Shawn P. Foley

Registration No. (Attorney/Agent)

Signature

*Shawn P. Foley*

Date July 23, 2001

Express Mail Label No. EL804524760US

07/23/01  
JC960 U.S. PTO

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2001

*Patent fees are subject to annual revision.*

**TOTAL AMOUNT OF PAYMENT** (\$ 880.00)

## Complete if Known

Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Thor Nilsen
Examiner Name	J. Riley
Group Art Unit	1656
Attorney Docket No.	Polyprobe 3.0-017 cip cont cont

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 12-1095

Deposit Account Name Lerner, David, Littenberg,  
Krumholz & Mentlik, LLP

Charge Any Additional Fee Required Under  
37 CFR 1.16 and 1.17  Applicant claims small  
entity status See  
37 CFR 1.27

2.  Payment Enclosed

Check  Credit Card  Money Order  Other

## FEES CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900
Other fee (specify)		SUBTOTAL (3) (\$)	

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
101	710	201	355
106	320	206	160
107	490	207	245
108	710	208	355
114	150	214	75
SUBTOTAL (1) (\$)		710.00	

## 2. EXTRA CLAIM FEES

Total Claims	-20** =	Extra Claims	Fee from below	Fee Paid
25	-20** =	5	X 18 =	90.00
Independent Claims 4	-3** =	1	X 80 =	80.00
Multiple Dependent			=	

## Large Entity Small Entity

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	80	202 40 Independent claims in excess of 3
104	270	204 135 Multiple dependent claim, if not paid
109	80	209 40 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		170.00

\*\*or number previously paid, if greater; For Reissues, see above

Complete (if applicable)

Name (print/type)	Shawn P. Foley	Registration No (Attorney/Agent)	33,071	Telephone	(908) 518-6346
Signature	<i>Shawn P. Foley</i>		Date	July 23, 2001	

Express Mail Label No. EL804524760US